

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	RV		11/23/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TR	1112	4/5/02
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	04/12/02 02/03/02
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29	✓ ✓ ✓ ✓
30	✓ ✓ ✓ ✓
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47	✓ ✓ ✓ ✓
48	✓ ✓ ✓ ✓
49	✓ ✓ ✓ ✓
50	✓ ✓ ✓ ✓

Claim	Date
Final Original	04/12/02 02/03/02
51	✓ ✓ ✓ ✓
52	✓ ✓ ✓ ✓
53	✓ ✓ ✓ ✓
54	✓ ✓ ✓ ✓
55	✓ ✓ ✓ ✓
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57	✓ ✓ ✓ ✓
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99	✓ ✓ ✓ ✓
100	✓ ✓ ✓ ✓

Claim	Date
Final Original	
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If more than 150 claims or 10 actions  
 staple additional sheet here

(LEFT INSIDE)

552  
 11/23/01

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